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Application Data Sheet 37 CFR			CFR 1	Attorney Docket Number Application Number			NL 04	10287				
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Title of Inver	Title of Invention INTEGRATED CIRCUIT AND METHOD OF COMMUNICATION SERVICE MAPPING											
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Mailing Address of Applicant:												
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Address 2												
City	Eindhoven						State	e/Provin	ce			
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Applicant 2	<u> </u>					1				Remove		
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Customer Number 24737										
Email Address		jeanne.rusciano@philips.com				Add Email	R	emove	Email	
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Title of the Invent	ion	INTEGRATED CIRCUIT AND METHOD OF COMMUNICATION SERVICE MAPPING								
Attorney Docket N	Number	NL 040287 Small Entity Status Claimed								
Application Type		Nonprovisional								
Subject Matter		Utility								
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Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.										
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Application Data Sheet 37 CFR 1.76

Application Number

Application Integrated CIRCUIT AND METHOD OF COMMUNICATION SERVICE MAPPING

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).

	Re								
Application Number	Country i	Parent Filing Date (YYYY-MM-DD)	Priority Claimed						
04101095.0	EP	2004-03-17	Yes   No						
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## **Assignee Information:**

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Assignee 1 Remove							
If the Assignee is an Orga	nization check here.						
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Address 2							
City	EINDHOVEN	State/Province					
Country   NL		Postal Code	5621 BA				
Phone Number		Fax Number					
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Additional Assignee Data button.	Additional Assignee Data may be generated within this form by selecting the Add button.						

## Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.								
Signature	/Michael E. Marion/		Date (YYYY-MM-DD)	2006-08-25				
First Name	Michael E. Last Name		Marion	Registration Number	32,266			

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